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## TRANSMITTAL FORM

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Total Number of Pages in This Submission

Application Number 10/713,565

Filing Date 11/13/2003

First Named Inventor Harvey A. Fishman

Art Unit 1651

Examiner Name Allison M. Ford

Attorney Docket Number S02-296/US

### ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
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Remarks

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Lumen Intellectual Property Services, Inc.		
Signature			
Printed name	Ron Jacobs		
Date	7-28-05	Reg. No.	50,142

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/713,565  
Filing Date: 11/13/2003  
Applicants: Fishman *et al.*  
Title: Artificial Synapse Chip

Docket No.: S02-296/US  
Art Unit: 1651  
Examiner: Allison M. Ford

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Date	Signature
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Type or print name of person signing	

**Reply under 37 CFR 1.111**

Assistant Commissioner for Patents  
Alexandria, VA 22313-1450

Sir:

This reply is in response to an Office Action dated 7/12/2005. With this reply, the applicant has included the status of claim **1-38** and presents a complete listing of all of the claims (see pages 2-6 of this reply).

Respectfully submitted,

[Signature]  
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